PERSONALITY [ ] FILE REQUEST

TO RI/ANALYSIS SECTION	DATE 14 Feb 57	ACTION
		X OPEN	AMEND	CLOSE

FROM SR/2	ROOM NO. 1060 J	TELEPHONE 3582

INSTRUCTIONS: *Form must be typed or printed in block letters.*

SECTION I: *List 201 number, name and identifying data in the spaces provided. All known aliases and variants (including maiden name, if applicable) must be listed. If the identifying data varies with the alias used, a separate form must be used. Write UNKNOWN for items you are unable to complete.*

SECTION II: *List cryptonym or pseudonym, if assigned. If true name is sensitive, obtain 201 number from 201 Control Desk and complete Section I and Section III. On a separate form, enter the 201 number and complete Section II and Section III. Submit each form separately.*

SECTION III: *To be completed in all cases.*

SECTION I

X SENSITIVE		0.	1.	SOURCE DOCUMENT	
NON-SENSITIVE		(Middle)	(First)	(Title)	3.

NAME (Last)					
OZOLINS, Edvins					

NAME VARIANT

TYPE NAME 2 (Last)	(Middle)	(First)	(Title)

PHOTO 4.	BIRTH DATE 5.	COUNTRY OF BIRTH 6.	CITY OR TOWN OF BIRTH 7.	OTHER IDENTIFICATION 8.
X YES NO	D 12 M 12 Y 13	Latvia	Riga	1. 2. 3.

OCCUPATION/POSITION	OCC/POS. CODE 9.
Contract agent	

SECTION II

CRYPTONYM	PSEUDONYM

SECTION III

COUNTRY OF RESIDENCE 10.	ACTION DESK 11.	2ND COUNTRY INTEREST 12.	3RD COUNTRY INTEREST 12A.
Latvia	SR/2		

COMMENTS:

PERMANENT CHARGE	RESTRICTED FILE	SIGNATURE
X YES NO	X YES NO	